

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 163 OF 260

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

California Republican Party Federal Acct.

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

A. Chang, Mike, , ,

Mailing Address 231 Encounter Bay

City  
AlamedaState  
CAZip Code  
94502FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Mike Chang, DDS

Occupation (for Individual)

Dentist

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

300.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2022

Transaction ID : IA357211

Amount of Each Receipt this Period

100.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

B. Cox, Gretchen, , ,

Mailing Address 107 Helen Dr

City  
FullertonState  
CAZip Code  
92835FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

N/A

Occupation (for Individual)

Retired

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

470.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2022

Transaction ID : IA357222

Amount of Each Receipt this Period

250.00

☐ Memo Item

Full Name of Individual (Last, First, Middle Initial) or Full Organization Name

C. Maryott, Brian, , ,

Mailing Address 31726 Rancho Viejo Road

City  
San Juan CapistranState  
CAZip Code  
92675FEC ID number of contributing  
federal political committee.

C

Name of Employer (for Individual)

Maryott For Congress

Occupation (for Individual)

Maryott For Congress

Receipt For:

☐ Primary ☐ General  
☐ Other (specify)

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M M / D D D / Y Y Y Y Y Y  
03 / 27 / 2022

Transaction ID : IA357227

Amount of Each Receipt this Period

500.00

☐ Memo Item

SUBTOTAL of Receipts This Page (optional).....▶

850.00

TOTAL This Period (last page this line number only).....▶